

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-375)

SERIAL NO.

10-550380

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 3 rd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	2	5		5		5
TOTAL DEP.	3	4		4		4
TOTAL CLAIMS	7	9		9		9

	AS FILED		AFTER 1 st AMENDMENT		AFTER 3 rd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

PTO-1500 (REV. 11-84)

U.S. DEPARTMENT OF COMMERCE

Best Available Copy